

**House File 203 - Introduced**

HOUSE FILE 203  
BY COMMITTEE ON STATE  
GOVERNMENT

(SUCCESSOR TO HSB 75)

**A BILL FOR**

1 An Act providing for the licensing of polysomnographic  
2 technologists and exceptions thereto, making penalties  
3 applicable, and including effective date provisions.  
4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. Section 135.24, subsection 2, paragraph a, Code  
2 2015, is amended to read as follows:

3 a. Procedures for registration of health care providers  
4 deemed qualified by the board of medicine, the board of  
5 physician assistants, the dental board, the board of nursing,  
6 the board of chiropractic, the board of psychology, the board  
7 of social work, the board of behavioral science, the board  
8 of pharmacy, the board of optometry, the board of podiatry,  
9 the board of physical and occupational therapy, the board of  
10 respiratory care and polysomnography, and the Iowa department  
11 of public health, as applicable.

12 Sec. 2. Section 147.1, subsections 3 and 6, Code 2015, are  
13 amended to read as follows:

14 3. "*Licensed*" or "*certified*", when applied to a physician  
15 and surgeon, podiatric physician, osteopathic physician and  
16 surgeon, physician assistant, psychologist, chiropractor,  
17 nurse, dentist, dental hygienist, dental assistant,  
18 optometrist, speech pathologist, audiologist, pharmacist,  
19 physical therapist, physical therapist assistant, occupational  
20 therapist, occupational therapy assistant, orthotist,  
21 prosthetist, pedorthist, respiratory care practitioner,  
22 practitioner of cosmetology arts and sciences, practitioner  
23 of barbering, funeral director, dietitian, marital and  
24 family therapist, mental health counselor, polysomnographic  
25 technologist, social worker, massage therapist, athletic  
26 trainer, acupuncturist, nursing home administrator, hearing aid  
27 dispenser, or sign language interpreter or transliterator means  
28 a person licensed under this subtitle.

29 6. "*Profession*" means medicine and surgery, podiatry,  
30 osteopathic medicine and surgery, practice as a physician  
31 assistant, psychology, chiropractic, nursing, dentistry,  
32 dental hygiene, dental assisting, optometry, speech pathology,  
33 audiology, pharmacy, physical therapy, physical therapist  
34 assisting, occupational therapy, occupational therapy  
35 assisting, respiratory care, cosmetology arts and sciences,

1 barbering, mortuary science, marital and family therapy, mental  
2 health counseling, polysomnography, social work, dietetics,  
3 massage therapy, athletic training, acupuncture, nursing  
4 home administration, hearing aid dispensing, sign language  
5 interpreting or transliterating, orthotics, prosthetics, or  
6 pedorthics.

7 Sec. 3. Section 147.2, subsection 1, Code 2015, is amended  
8 to read as follows:

9 1. A person shall not engage in the practice of medicine  
10 and surgery, podiatry, osteopathic medicine and surgery,  
11 psychology, chiropractic, physical therapy, physical  
12 therapist assisting, nursing, dentistry, dental hygiene,  
13 dental assisting, optometry, speech pathology, audiology,  
14 occupational therapy, occupational therapy assisting,  
15 orthotics, prosthetics, pedorthics, respiratory care,  
16 pharmacy, cosmetology arts and sciences, barbering, social  
17 work, dietetics, marital and family therapy or mental health  
18 counseling, massage therapy, mortuary science, polysomnography,  
19 athletic training, acupuncture, nursing home administration,  
20 hearing aid dispensing, or sign language interpreting  
21 or transliterating, or shall not practice as a physician  
22 assistant, unless the person has obtained a license for that  
23 purpose from the board for the profession.

24 Sec. 4. Section 147.13, subsection 18, Code 2015, is amended  
25 to read as follows:

26 18. For respiratory care and polysomnography, the board of  
27 respiratory care and polysomnography.

28 Sec. 5. Section 147.14, subsection 1, paragraph o, Code  
29 2015, is amended to read as follows:

30 o. For respiratory care and polysomnography, one licensed  
31 physician with training in respiratory care, ~~three~~ two  
32 respiratory care practitioners who have practiced respiratory  
33 care for a minimum of six years immediately preceding their  
34 appointment to the board and who are recommended by the society  
35 for respiratory care, one polysomnographic technologist who

1 has practiced polysomnography for a minimum of six years  
2 immediately preceding appointment to the board and who  
3 is recommended by the Iowa sleep society, and one member  
4 not licensed to practice medicine, osteopathic medicine,  
5 polysomnography, or respiratory care who shall represent the  
6 general public.

7 Sec. 6. Section 147.74, Code 2015, is amended by adding the  
8 following new subsection:

9 NEW SUBSECTION. 23A. A person who is licensed to engage in  
10 the practice of polysomnography shall have the right to use the  
11 title "polysomnographic technologist" or the letters "P.S.G.T."  
12 after the person's name. No other person may use that title  
13 or letters or any other words or letters indicating that the  
14 person is a polysomnographic technologist.

15 Sec. 7. NEW SECTION. 148G.1 **Definitions.**

16 As used in this chapter, unless the context otherwise  
17 requires:

18 1. "*Board*" means the board of respiratory care and  
19 polysomnography established in chapter 147.

20 2. "*Direct supervision*" means that the polysomnographic  
21 technologist providing supervision must be present where the  
22 polysomnographic procedure is being performed and immediately  
23 available to furnish assistance and direction throughout the  
24 performance of the procedure.

25 3. "*General supervision*" means that the polysomnographic  
26 procedure is provided under a physician's or qualified health  
27 care professional prescriber's overall direction and control,  
28 but the physician's or qualified health care professional  
29 prescriber's presence is not required during the performance  
30 of the procedure.

31 4. "*Physician*" means a person who is currently licensed in  
32 Iowa to practice medicine and surgery or osteopathic medicine  
33 and surgery and who is board certified and who is actively  
34 involved in the sleep medicine center or laboratory.

35 5. "*Polysomnographic student*" means a person who is

1 enrolled in a program approved by the board and who may  
2 provide sleep-related services under the direct supervision  
3 of a polysomnographic technologist as a part of the person's  
4 educational program.

5 6. "*Polysomnographic technician*" means a person who has  
6 graduated from a program approved by the board, but has not  
7 yet received an accepted national credential awarded from an  
8 examination program approved by the board and who may provide  
9 sleep-related services under the direct supervision of a  
10 licensed polysomnographic technologist for a period of up to  
11 thirty days following graduation while awaiting credentialing  
12 examination scheduling and results.

13 7. "*Polysomnographic technologist*" means a person licensed  
14 by the board to engage in the practice of polysomnography under  
15 the general supervision of a physician or a qualified health  
16 care professional prescriber.

17 8. "*Practice of polysomnography*" means as described in  
18 section 148G.2.

19 9. "*Qualified health care practitioner*" means an individual  
20 who is licensed under section 147.2, and who holds a  
21 credential listed on the board of registered polysomnographic  
22 technologists list of accepted allied health credentials.

23 10. "*Qualified health care professional prescriber*" means a  
24 physician assistant operating under the prescribing authority  
25 granted in section 147.107 or an advanced registered nurse  
26 practitioner operating under the prescribing authority granted  
27 in section 147.107.

28 11. "*Sleep-related services*" means acts performed by  
29 polysomnographic technicians, polysomnographic students, and  
30 other persons permitted to perform those services under this  
31 chapter, in a setting described in this chapter that would be  
32 considered the practice of polysomnography if performed by a  
33 polysomnographic technologist.

34 **Sec. 8. NEW SECTION. 148G.2 Practice of polysomnography.**

35 The practice of polysomnography consists of but is not

1 limited to the following tasks as performed for the purpose of  
2 polysomnography, under the general supervision of a licensed  
3 physician or qualified health care professional prescriber:

4 1. Monitoring, recording, and evaluating physiologic  
5 data during polysomnographic testing and review during the  
6 evaluation of sleep-related disorders, including sleep-related  
7 respiratory disturbances, by applying any of the following  
8 techniques, equipment, or procedures:

9 a. Noninvasive continuous, bilevel positive airway pressure,  
10 or adaptive servo-ventilation titration on spontaneously  
11 breathing patients using a mask or oral appliance; provided,  
12 that the mask or oral appliance does not extend into the  
13 trachea or attach to an artificial airway.

14 b. Supplemental low-flow oxygen therapy of less than six  
15 liters per minute, utilizing a nasal cannula or incorporated  
16 into a positive airway pressure device during a polysomnogram.

17 c. Capnography during a polysomnogram.

18 d. Cardiopulmonary resuscitation.

19 e. Pulse oximetry.

20 f. Gastroesophageal pH monitoring.

21 g. Esophageal pressure monitoring.

22 h. Sleep stage recording using surface  
23 electroencephalography, surface electrooculography, and surface  
24 submental electromyography.

25 i. Surface electromyography.

26 j. Electrocardiography.

27 k. Respiratory effort monitoring, including thoracic and  
28 abdominal movement.

29 l. Plethysmography blood flow monitoring.

30 m. Snore monitoring.

31 n. Audio and video monitoring.

32 o. Body movement monitoring.

33 p. Nocturnal penile tumescence monitoring.

34 q. Nasal and oral airflow monitoring.

35 r. Body temperature monitoring.

1 2. Monitoring the effects that a mask or oral appliance  
2 used to treat sleep disorders has on sleep patterns; provided,  
3 however, that the mask or oral appliance shall not extend into  
4 the trachea or attach to an artificial airway.

5 3. Observing and monitoring physical signs and symptoms,  
6 general behavior, and general physical response to  
7 polysomnographic evaluation and determining whether initiation,  
8 modification, or discontinuation of a treatment regimen is  
9 warranted.

10 4. Analyzing and scoring data collected during the  
11 monitoring described in this section for the purpose of  
12 assisting a physician in the diagnosis and treatment of sleep  
13 and wake disorders that result from developmental defects,  
14 the aging process, physical injury, disease, or actual or  
15 anticipated somatic dysfunction.

16 5. Implementation of a written or verbal order from a  
17 physician or qualified health care professional prescriber to  
18 perform polysomnography.

19 6. Education of a patient regarding the treatment regimen  
20 that assists the patient in improving the patient's sleep.

21 7. Use of any oral appliance used to treat sleep-disordered  
22 breathing while under the care of a licensed polysomnographic  
23 technologist during the performance of a sleep study, as  
24 directed by a licensed dentist.

25 Sec. 9. NEW SECTION. 148G.3 **Location of services.**

26 The practice of polysomnography shall take place only in a  
27 facility that is accredited by a nationally recognized sleep  
28 medicine laboratory or center accrediting agency, in a facility  
29 operated by a hospital or a hospital licensed under chapter  
30 135B, or in a patient's home pursuant to rules adopted by the  
31 board; provided, however, that the scoring of data and the  
32 education of patients may take place in another setting.

33 Sec. 10. NEW SECTION. 148G.4 **Scope of chapter.**

34 Nothing in this chapter shall be construed to limit or  
35 restrict a health care practitioner licensed in this state from

1 engaging in the full scope of practice of the individual's  
2 profession.

3 Sec. 11. NEW SECTION. 148G.5 Rulemaking.

4 The board shall adopt rules necessary for the implementation  
5 and administration of this chapter and the applicable  
6 provisions of chapters 147 and 272C.

7 Sec. 12. NEW SECTION. 148G.6 Licensing requirements.

8 1. Beginning January 1, 2017, a person seeking licensure  
9 as a polysomnographic technologist shall apply to the board  
10 and pay the fees established by the board for licensure.  
11 The application shall show that the applicant is of good  
12 moral character and is at least eighteen years of age, and  
13 shall include proof that the person has satisfied one of the  
14 following educational requirements:

15 a. Graduation from a polysomnographic educational program  
16 that is accredited by the committee on accreditation for  
17 polysomnographic technologist education or an equivalent  
18 program as determined by the board.

19 b. Graduation from a respiratory care educational program  
20 that is accredited by the commission on accreditation  
21 for respiratory care or by a committee on accreditation  
22 for the commission on accreditation of allied health  
23 education programs, and completion of the curriculum for a  
24 polysomnographic certificate established and accredited by the  
25 commission on accreditation of allied health education programs  
26 as an extension of the respiratory care program.

27 c. Graduation from an electroneurodiagnostic technologist  
28 educational program that is accredited by the committee  
29 on accreditation for education in electroneurodiagnostic  
30 technology or by a committee on accreditation for the  
31 commission on accreditation of allied health education  
32 programs, and completion of the curriculum for a  
33 polysomnographic certificate established and accredited by the  
34 commission on accreditation of allied health education programs  
35 as an extension of the electroneurodiagnostic educational

1 program.

2 2. *a.* Notwithstanding subsection 1, beginning January  
3 1, 2017, the board shall issue a license to perform  
4 polysomnography to a person who holds an active license under  
5 section 147.2 in a profession other than polysomnography and  
6 who is in good standing with the board for that profession upon  
7 application to the board demonstrating any of the following:

8 (1) Successful completion of an educational program in  
9 polysomnography approved by the board.

10 (2) Successful completion of an examination in  
11 polysomnography approved by the board.

12 (3) Verification from the medical director of the person's  
13 current employer that the person has completed sufficient  
14 on-the-job training in the field of polysomnography, along with  
15 written verification from the medical director of the person's  
16 current employer that the person is competent to perform  
17 polysomnography.

18 *b.* A person issued a license under this subsection is exempt  
19 from the licensure fee required for a polysomnography license.

20 3. Notwithstanding subsection 1, beginning January 1,  
21 2017, a person who is working in the field of sleep medicine  
22 on January 1, 2017, may apply to the board for a license to  
23 perform polysomnography. The board shall issue a license to  
24 the person, without examination, provided the application  
25 contains verification that the person has completed five  
26 hundred hours of paid clinical or nonclinical polysomnographic  
27 work experience within the three years prior to submission  
28 of the application. The application shall also contain  
29 verification from the medical director of the person's  
30 current employer that the person is competent to perform  
31 polysomnography. An active license holder under section 147.2  
32 issued a license under this subsection is exempt from the  
33 licensure fee required for a polysomnography license.

34 4. A person who is working in the field of sleep medicine  
35 on January 1, 2017, who is not otherwise eligible to obtain

1 a license pursuant to this section shall have until January  
2 1, 2018, to achieve a passing score on an examination as  
3 designated by the board. The board shall allow the person  
4 to attempt the examination and be awarded a license as a  
5 polysomnographic technologist by meeting or exceeding the  
6 passing point established by the board. After January 1,  
7 2018, only persons licensed as polysomnographic technologists  
8 pursuant to this chapter, or excepted from the requirements of  
9 this chapter may perform sleep-related services.

10 5. The fees assessed by the board shall be sufficient to  
11 cover all costs associated with the administration of this  
12 chapter.

13 Sec. 13. NEW SECTION. 148G.7 **Persons exempt from licensing**  
14 **requirement.**

15 1. The following persons may provide sleep-related services  
16 without being licensed as a polysomnographic technologist under  
17 this chapter:

18 a. A qualified health care practitioner may provide  
19 sleep-related services under the direct supervision of a  
20 licensed polysomnographic technologist for a period of up to  
21 six months while gaining the clinical experience necessary  
22 to meet the admission requirements for a polysomnographic  
23 credentialing examination. The board may grant a one-time  
24 extension of up to six months.

25 b. A polysomnographic student may provide sleep-related  
26 services under the direct supervision of a polysomnographic  
27 technologist as a part of the student's educational program  
28 while actively enrolled in a polysomnographic educational  
29 program that is accredited by the commission on accreditation  
30 of allied health education programs or an equivalent program as  
31 determined by the board.

32 2. Before providing any sleep-related services, a  
33 polysomnographic technician or polysomnographic student who is  
34 obtaining clinical experience shall give notice to the board  
35 that the person is working under the direct supervision of a

1 polysomnographic technologist in order to gain the experience  
2 to be eligible to sit for a national certification examination.  
3 The person shall wear a badge that appropriately identifies the  
4 person while providing such services.

5 Sec. 14. NEW SECTION. 148G.8 Licensing sanctions.

6 The board may impose sanctions for violations of this  
7 chapter as provided in chapters 147 and 272C.

8 Sec. 15. Section 152B.1, subsection 1, Code 2015, is amended  
9 to read as follows:

10 1. "*Board*" means the board of respiratory care and  
11 polysomnography created under chapter 147.

12 Sec. 16. Section 272C.1, subsection 6, paragraph z, Code  
13 2015, is amended to read as follows:

14 z. The board of respiratory care and polysomnography in  
15 licensing respiratory care practitioners pursuant to chapter  
16 152B and polysomnographic technologists pursuant to chapter  
17 148G.

18 Sec. 17. INITIAL APPOINTMENT OF POLYSOMNOGRAPHIC  
19 TECHNOLOGIST TO BOARD. For the initial appointment of the  
20 polysomnographic member to the board of respiratory care and  
21 polysomnography pursuant to section 147.14, as amended in this  
22 Act, such appointee must be eligible for licensure pursuant to  
23 this Act. The appointment shall be effective upon the first  
24 expiration of the term of an existing respiratory care board  
25 member which occurs after the effective date of this section  
26 of this Act.

27 Sec. 18. EFFECTIVE DATE. The following provision or  
28 provisions of this Act take effect January 1, 2017:

29 1. The section of this Act amending section 147.2,  
30 subsection 1.

31 EXPLANATION

32 The inclusion of this explanation does not constitute agreement with  
33 the explanation's substance by the members of the general assembly.

34 This bill requires the licensing of polysomnographic  
35 technologists beginning January 1, 2017, and makes the

1 provisions of Code chapters 147 and 272C, including penalty  
2 and other regulatory provisions, applicable to other health  
3 professions applicable to the practice of polysomnography.  
4 Code section 147.86 provides that it is a serious misdemeanor  
5 to violate a provision of the licensing laws. A serious  
6 misdemeanor is punishable by confinement for no more than one  
7 year and a fine of at least \$315 but not more than \$1,875. The  
8 licensing program is administered and regulated by the board of  
9 respiratory care and polysomnography, with one respiratory care  
10 practitioner replaced by a polysomnographic technologist.

11 The bill provides that the board may issue a license to  
12 a person who has graduated from one of three educational  
13 programs approved by the board. The board shall also issue  
14 a license to practice polysomnography to any person licensed  
15 under Code section 147.2 as long as the person's application  
16 demonstrates that the person has completed an educational  
17 program approved by the board or passed an examination approved  
18 by the board, or that the medical director of the person's  
19 current employer verifies that the person is competent to  
20 perform polysomnography. The board shall license a person  
21 working in the field of sleep medicine on January 1, 2017,  
22 without examination, to perform polysomnography if the person  
23 provides evidence that the person has completed 500 hours of  
24 paid clinical or nonclinical polysomnographic work experience  
25 within the three years prior to submission of the application  
26 and verification from the person's medical director that the  
27 person is competent to perform polysomnography. A person  
28 currently practicing polysomnography who is not otherwise  
29 eligible for licensure under the bill has until January 1,  
30 2018, to pass an examination approved by the board.

31 Persons holding licenses issued pursuant to Code chapter 147  
32 are exempt from licensure fees required for a polysomnography  
33 license. The fees assessed by the board shall be sufficient to  
34 cover all costs associated with the administration of the bill.

35 A licensed polysomnographic technologist practices under

1 the general supervision of a physician, a physician assistant,  
2 or an advanced registered nurse practitioner, providing  
3 specifically enumerated services related to sleep disorders. A  
4 polysomnographic student enrolled in an approved educational  
5 program provides services under the direct supervision of a  
6 polysomnographic technologist.